2016 - 04 - 19 - 03 - 00067645

FE7AN014

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, over the lines.	type 12FE4M5	
KEY STATES				
ADDRESS (number and street) Check if different than previously reported. (ACC) FEC IDENTIFICATION N	BINITIE IA WASIH INGI UMBER ▼	CITY A	JDC 12 STATE▲	0036 - L
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Choose One) July 15 Quarterly Report (Choose One) October 15 Quarterly Report (Choose One) January 31 Year-End Report (Non-electic Year Only) (MY) Termination Report (TER)	Report Due On: (c) 12-Day PRE-Election Report for the Cas) (d) 30-Day POST-Election Report for the Cas Post Post Post Post Post Post Post Pos	Mar 20 (M3) Jun Apr 20 (M4) Jul Primary (12P) Convention (12C) ction on General (30G)	20 (M5) Aug 20 20 (M6) Sep 20 20 (M7) Oct 20 General (126 Special (128)	(M9) Dec 20 (M12) (Non-Election Year Only) (M10) Jan 31 (YE) G) Runoff (12R) in the State of
5. Covering Period OT 01 2015 through 12 31 2015				
Type or Print Name of Treasurer Robert Policy Control of the best of my knowledge and belief it is true, correct and complete.				
Signature of Treasurer	Robert 6	Visin	Date <u>04</u>	08 2016
NOTE: Submission of false, error	eous, or incomplete inform	ation may subject the person		FEC FORM 3X Rev. 12/2004